City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 54 E. Promenade	oite	e Phone: 207-871-7060		Permit No:	
Owner Address: SAA	Lessee/Buyer's Name:	Phone: N/A	Business!	Name:	700288
Contractor Name: **Dong's Home Improvement	Address: P.O. Box 2313 South Portland, ME 04106 831-2328				Permit Issued:
Past Use:	Proposed Use:	COST OF WOR	1	PERMIT FEE:	APR
1-Family	Same	\$ 6,000		\$ 60.00	Att. 1
•		FIRE DEPT. □		INSPECTION:	
			Denied	Use Group & - 3 Type 50	Zgne; CBL:
		Signature:		Signature:	003-F-025
Proposed Project Description:			ACTIVITIES DISTRICT (P.A.D.)		Zoning Approval:
r . 1	Action:	Approved	Special Zone or Reviews:		
5 windows installed, interior r new entry way.		Approved wi	Shoreland √		
new energy way.			Denied		Thomas Die
		Signature:		Date:	☐ Flood Zone ☐ Subdivision
Permit Taken By: UB	Date Applied For:	3-31-00			☐ Site Plan maj ☐minor☐mm ☐
			_		Zoning Appeal
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.					□ Variance
2. Building permits do not include plumbing, septic or electrical work.					☐ Miscellaneous ☐ Conditional Use
Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work***Call Dong for pick up 831-2328					□ Interpretation
					☐ Approved ☐ Denied
					Defined
					Historic Preservation
					☑Not in District or Landmark ☐Does Not Require Review
				DEPMIT ISSUED	A - 42
				PERMIT ISSUED TH REQUIREMENTS	Action:
	CERTIFICATION				
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition,					
authorized by the owner to make this application if a permit for work described in the application is					,
areas covered by such permit at any reasonable h				e the authority to enter at	Date:
					Market and the state of the sta
		3-31-00			
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	
					PERMIT ISSU ED CERLIPISTIBILEMENTS
RESPONSIBLE PERSON IN CHARGE OF WOR	K, TITLE			PHONE:	CEQ DISTRIBLE MENTS